PAGE 1 / 64

Image# 14960813823

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIM 3X F	or Other Than An Au	uthorized Committe	е		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	g, type	12FE4M5	
National Association of	Mutual Insurance	Companies PAC			
	<u> </u>				
ADDRESS (number and street) Check if different than previously reported. (ACC)	PO Box 68700 Indianapolis			IN L	46268
2. FEC IDENTIFICATION NU	MBER ▼	CITY A		STATE 🛦	ZIP CODE ▲
C C00170258	3.	IS THIS X NI REPORT X (N	EW I) OR	AME (A)	ENDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Quarterly Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: M X Ap (c) 12-Day PRE-Election Report for the: 3) Elec (d) 30-Day POST-Election Report for the:	Primary (12P) Convention (1	2C)	Sep 2	in the State of
5. Covering Period 03	01 2014		03	31	2014
I certify that I have examined thi Type or Print Name of Treasurer	•	_	elief it is tru	e, correct and	complete.
Signature of Treasurer Mr. G	regg A. Dykstra J.D.	[Electronically		ate 04	/ DDD / YDY Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, errone Office	ous, or incomplete informat	tion may subject the perso	on signing th	is Report to the	
Use					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 03 01 2014 To: 03 31 2014

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		61979.34
	(b) Cash on Hand at Beginning of Reporting Period	110776.80	
	(c) Total Receipts (from Line 19)	56221.71	108634.84
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	166998.51	170614.18
7.	Total Disbursements (from Line 31)	112682.40	116298.07
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54316.11	54316.11
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

ributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	37889.18	63175.65
Than Political Committees	37889.18	02475.05
	37889.18	00475.05
(i) Itemized (use Schedule A)	37009.10	
		00170.00
(ii) Unitemized	18281.15	37569.89
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	56170.33	100745.54
Political Party Committees	0.00	0.00
	0.00	7000.00
	56170.33	107745.54
sfers From Affiliated/Other		
/ Committees	0.00	0.00
oans Received	0.00	0.00
	0.00	0.00
	0.00	0.00
·	45.00	873.99
	1000	073.33
	0.00	0.00
	0.00	5.00
· · · · · · · · · · · · · · · · · · ·	6 38	15.31
	0.30	13.31
	0.00	0.00
		0.00
evin Funds (from Schedule H5)	0.00	0.00
otal Transfers (add 18(a) and 18(b))	0.00	0.00
	Lines 11(a)(i) and (ii)	Lines 11(a)(i) and (ii)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

Total This Period	COLUMN B Calendar Year-to-Date		
0.00	0.00		
0.00	0.00		
1182.40	1298.07		
1182.40	1298.07		
0.00	0.00		
110500.00	113000.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
, , , , , , , , , , , , , , , , , , , ,			
0.00	0.00		
1000.00	2000.00		
))			
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
0.00	0.00		
112682.40	116298.07		
112682.40	116298.07		
	0.00 1182.40 1182.40 0.00 110500.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 1000.00 1000.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	56170.33	107745.54
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56170.33	107745.54
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1182.40	1298.07
7. Offsets to Operating Expenditures (from Line 15, page 3)	45.00	873.99
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1137.40	424.08

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 6 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Cathy M. Adcock Date of Receipt Mailing Address PO Box 30660 03 2014 City Zip Code State Transaction ID: A6DABEE78A84D4E18A8F Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Bruce Albro Date of Receipt Mailing Address PO Box 111 03 25 2014 City State Zip Code Transaction ID: AB4C587E93F784CA39F5 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Michael J. Alexander Date of Receipt Mailing Address PO Box 2502 03 25 2014 City Zip Code State Transaction ID: AE624F806A15A4FB194A ND Fargo 58108-2502 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Nodak Mutual Insurance Company Executive VP & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 575.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR	R LINE	NU	IMBER	PAGE	7	OF	6	34	
Use separate schedule(s)	(che	eck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c	12			
_ common common, cage		13		14		15	16		7	17

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Neil Alldredge Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Senior Vice President - State and Poli Aggregate Year-to-Date ▼ 240.00	Date of Receipt 03 07 2014 Transaction ID: A379B10A22FDE42509B5 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Mr. Neil Alldredge Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Senior Vice President - State and Poli Aggregate Year-to-Date 280.00	Date of Receipt 03 21 2014 Transaction ID: A156B3216AAB74383A3E Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Mr. Brent Bahler Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Vice President, Public Affairs Aggregate Year-to-Date ▼ 307.74	Date of Receipt 03 07 2014 Transaction ID: A7B1E9CA6D72E464F9F8 Amount of Each Receipt this Period 51.29
SUBTOTAL of Receipts This Page (optional)	•	131.29
TOTAL This Period (last page this line number	er only)	

	FOR L	INE N	JMBER	:	PAGE	:	8 C)⊢			
Use separate schedule(s)	(check	(check only one)									
for each category of the	X 1	. —	ا بیدا		ا بد		4.0				
Detailed Summary Page		1a	11b		11c		12				
., ., .,	1 1:	3	14		15		16	Г			

or for commercial purposes, other than using the	ne name and address of any political committee to	
Name of committee (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Brent Bahler		Date of Receipt
Mailing Address PO Box 68700		03 21 2014
City Indianapolis	State Zip Code IN 46268-0700	Transaction ID : A534316AF4E0E454C89F Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	51.29
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Public Affairs Aggregate Year-to-Date ▼ 359.03	
Full Name (Last, First, Middle Initial) Mr. John S. Benson		Date of Receipt
Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing	State Zip Code MI 48787-0001	03 14 2014 Transaction ID : ACBB5E52AD8BE4AB599 Amount of Each Receipt this Period
Name of Employer Frankenmuth Mutual Insurance Company Receipt For:	Occupation Chairman & CEO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	702.00	
Full Name (Last, First, Middle Initial) Mr. John S. Benson Mailing Address One Mutual Avenue		Date of Receipt 03 28 2014
City Frankenmuth	State Zip Code MI 48787-0001	Transaction ID : A3D9A063745844C41BF9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer Frankenmuth Mutual Insurance Company	Occupation Chairman & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 819.00	
SUBTOTAL of Receipts This Page (optional)		285.29
TOTAL This Period (last page this line numbe	er only)	

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) X 11a 11b 11c

9 OF 64

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. John J. Bishop CPCU, CLU Date of Receipt Mailing Address 471 E Broad St 2014 26 City Zip Code State Transaction ID: A95DCB6203DA2431390F OH Columbus 43215-3842 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Chairman of the Board Motorists Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Todd Boyer Date of Receipt Mailing Address PO Box 111 03 03 2014 City State Zip Code Transaction ID: A9D56DB6BFF84410885D OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mike A. Brogan Date of Receipt Mailing Address PO Box 111 03 11 2014 City Zip Code State Transaction ID: A31B97B557A1A459581C OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Vice President of Claims Ohio Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 3000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: PAGE 10 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Scott Carmack Date of Receipt Mailing Address 1510 N Elms Rd 06 2014 City Zip Code State Transaction ID: AD0E163312B964903B1D Flint MI 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Vice President/Director of Underwritin Pioneer State Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Ginny Caro Date of Receipt Mailing Address 3030 N 3rd St 03 06 2014 City State Zip Code Transaction ID: A555A6C59E7BF47B9A4C ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President of Claims Services Receipt For: Aggregate Year-to-Date ▼ Primary General 208.30 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Ginny Caro Date of Receipt Mailing Address 3030 N 3rd St 03 21 2014 City State Zip Code Transaction ID: A47BEE6617F824B3B9BD ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Name of Employer Occupation Vice President of Claims Services CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 249.96 Other (specify) 383.32 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

	FOR	R LINE	NU	IMBER	:	PAGE	· '	11 O	·F	64	
Use separate schedule(s)	(che	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16		717	

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Dawn Carter Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Underwriting Quality Analyst Aggregate Year-to-Date ▼ 250.00	Date of Receipt 03 14 2014 Transaction ID: A3388EACA36CE447CAF3 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Charles M. Chamness Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation President & CEO Aggregate Year-to-Date ▼ 540.00	Date of Receipt 03 07 2014 Transaction ID : AB7AE6505FD06484FAD0 Amount of Each Receipt this Period 90.00
Full Name (Last, First, Middle Initial) Mr. Charles M. Chamness Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation President & CEO Aggregate Year-to-Date ▼ 630.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional)	>	430.00
TOTAL This Period (last page this line number	er only)	

	FOF	R LINE	NU	IMBER	PAGE 12 (OF 64			
Use separate schedule(s)	(che	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16		17	

Full Name (Last, First, Middle Initial) Mr. Christopher Cleveland Mailing Address 1510 N Elms Rd		Date of Receipt 03 06 2014
City Flint FEC ID number of contributing federal political committee. Name of Employer Pioneer State Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48532-2033 C Occupation Managing Actuary Aggregate Year-to-Date ▼ 300.00	Transaction ID : AF4D555508DB445928, Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. Mark Coe Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-0111 C Occupation IT Manager Aggregate Year-to-Date ▼ 234.00	Date of Receipt 03 18 2014 Transaction ID : AA0F59DE8E0EC49398 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mr. Mark Coe Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary Other (specify) Other (specify)	State Zip Code OH 44820-0111 C Occupation IT Manager Aggregate Year-to-Date ▼ 273.00	Date of Receipt 03 26 2014 Transaction ID : ACC7B11F77B2D4BB2 Amount of Each Receipt this Period 39.00

FOR LINE NUMBER: PAGE 13 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Darwin G. Copeman CPCU Date of Receipt Mailing Address PO Box 468 2014 24 City Zip Code State Transaction ID: AA1E31E6375D9477B89B WI Neenah 54957-0468 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation President & CEO Jewelers Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Cratty Date of Receipt Mailing Address PO Box 37 03 21 2014 City State Zip Code Transaction ID: A29C7F77ADEC34807B49 IL Orion 61273-0037 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Svea Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jack D'Arcy Date of Receipt Mailing Address 1510 N Elms Rd 06 03 2014 City State Zip Code Transaction ID: A99A51731C1CF4450AD1 MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Pioneer State Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

-9

	FOF	R LINE	NU	IMBER	:	PAGE	•	14 OI	F	64
Use separate schedule(s)	(che	eck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Michael Davis Mailing Address 1430 Manistee Drive City Grand Blanc FEC ID number of contributing federal political committee.	State Zip Code MI 48439	Date of Receipt 03 06 2014 Transaction ID : A9DE27D4B366E4358B00 Amount of Each Receipt this Period 300.00
Name of Employer Pioneer State Mutual Insurance Company Receipt For: □ Primary □ General Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Dan DeArment PFMM Mailing Address PO Box 646 City Bedford FEC ID number of contributing federal political committee. Name of Employer Friends Cove Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code PA 15522-0646 C Occupation President/CEO Aggregate Year-to-Date ▼ 250.00	Date of Receipt 03 26 2014 Transaction ID: A4637EDF0D7FE4F498E3 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Anthony Decarlo Mailing Address 1 Commerce Sq City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103-7042 C Occupation Director Aggregate Year-to-Date ▼ 500.00	Date of Receipt 03
SUBTOTAL of Receipts This Page (optional)	>	1050.00
TOTAL This Period (last page this line numbe	r only)	

FOR LINE NUMBER: PAGE 15 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Rick DeGraw Date of Receipt Mailing Address 3030 N 3rd St 06 2014 City Zip Code State Transaction ID: ACA085388FC6D44F39C6 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation CAO & Senior Vice President CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rick DeGraw Date of Receipt Mailing Address 3030 N 3rd St 03 21 2014 City State Zip Code Transaction ID: A579F857C711543DB81A ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company CAO & Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Robert Detlefsen PhD Date of Receipt Mailing Address PO Box 68700 03 07 2014 City Zip Code State Transaction ID: A8BAA6D74D96E49A4B1D IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 43.48 С federal political committee. Name of Employer Occupation Vice President - Public Policy National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 260.88 Other (specify) 126.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

		PAGE 16 OF 64
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 14	11c 12

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Robert Detlefsen PhD		Date of Receipt
Mailing Address PO Box 68700		03 21 2014
City	State Zip Code	Transaction ID : AE7F07176FF5C4C208EE
Indianapolis	IN 46268-0700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43.48
Name of Employer	Occupation	
National Association of Mutual Insuran	Vice President - Public Policy	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	304.36	
Full Name (Last, First, Middle Initial) Mr. John Donilon		Date of Receipt
Mailing Address 42 Industrial Park Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	03 06 2014 Transaction ID : A2456BF3F8D8F4B3681D
Saco	ME 04072-1840	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Casco Indemnity Company	Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Mr. Mike Dorsey		Date of Receipt
Mailing Address 1510 N Elms Rd		03 06 2014
City	State Zip Code	Transaction ID : AD43CB4AC9E354769A1A
Flint	MI 48532-2033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Pioneer State Mutual Insurance Company	Assistant Vice President/Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		593.48
	<u> </u>	
TOTAL This Period (last page this line number	r only)	

	FO	R LINE	NU	IMBER	:	PAGE	17 OF	-	64
Use separate schedule(s)	(che	eck only	or	ne)					
for each category of the Detailed Summary Page	×	11a		11b		11c	12		
_ common common, cage		13		14		15	16		17

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any personal he name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Charles W. Drier Mailing Address PO Box 30660		Date of Receipt
		03 03 2014
City	State Zip Code	Transaction ID : AF2A002FEFB054FB288C
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Regional Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) Mr. Don Duran		Date of Receipt
Mailing Address PO Box 834		M = M / D = D / Y = Y = Y
City	State Zip Code	03 25 2014 Transaction ID : A8C89D2DC67CA4FA1BC9
Atwater	CA 95301-0834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	-
Merced Property & Casualty Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) C. Mr. Gregg A. Dykstra J.D.	1	Date of Receipt
Mailing Address 3601 Vincennes Rd		03 07 2014
City Indianapolis	State Zip Code IN 46268-1154	Transaction ID : A7DFDD98FE03D49EB852 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	96.16
Name of Employer	Occupation	-
National Association of Mutual Insuran	Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	576.96	
SUBTOTAL of Receipts This Page (optional).		1171.16
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 18 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Gregg A. Dykstra J.D. Date of Receipt Mailing Address 3601 Vincennes Rd 2014 21 City Zip Code State Transaction ID: AC493E4DB6BC243D5BA9 Indianapolis IN 46268-1154 Amount of Each Receipt this Period FEC ID number of contributing 96.16 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Chief Operating Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 673.12 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Fred A. Edmond CPCU, CIC Date of Receipt Mailing Address One Mutual Avenue 03 14 2014 City State Zip Code Transaction ID: AB3A3AB94D1F640BA82D MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company President & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Fred A. Edmond CPCU, CIC Date of Receipt Mailing Address One Mutual Avenue 03 28 2014 City Zip Code State Transaction ID: AB94332B903B449529B7 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 80.00 С federal political committee. Name of Employer Occupation President & COO Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) 256.16 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 19 OF 64 Use separate schedule(s) (check only one) X 11a 11b 12 11c 13 14 15 16

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Pam Emmendorfer Date of Receipt Mailing Address 1510 N Elms Rd 06 2014 City Zip Code State Transaction ID: A6ADE521391A342C1BD6 Flint MI 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Vice President of Human Resources Pioneer State Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Andrew M. Eriksen Date of Receipt Mailing Address PO Box 30660 03 03 2014 City State Zip Code Transaction ID: A8AB6127CA8BE4CC3B0B MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Stephen F. Fabian Date of Receipt Mailing Address 200 N Main St 03 14 2014 City Zip Code State Transaction ID: A7AA88D5846994AE98C1 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 83.34 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Vice President, Chief Information Offi Receipt For: Aggregate Year-to-Date ▼ Primary General 277.80 Other (specify) 483.34 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 20 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Kurt P. Foley Date of Receipt Mailing Address 1510 N Elms Rd 06 2014 City Zip Code State Transaction ID: A5A0BFA551DB7473AAC3 Flint MI 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 1400.00 federal political committee. Name of Employer Occupation President & CEO Pioneer State Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Chuck Garry Date of Receipt Mailing Address 1510 N Elms Rd 03 06 2014 City State Zip Code Transaction ID: A206261B8C9924BC482B MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Pioneer State Mutual Insurance Company Vice President - Director of Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Bryan Gilleland Date of Receipt Mailing Address One Mutual Avenue 2014 03 14 City State Zip Code Transaction ID: A46E9D052B301406DA8D MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 230.82 Other (specify) 1738.47 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 21 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Bryan Gilleland Date of Receipt Mailing Address One Mutual Avenue 2014 City State Zip Code Transaction ID: AF7D6901057A34D279C6 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 269.29 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Gordon H. Gingrich Date of Receipt Mailing Address 1510 N Elms Rd 03 06 2014 City State Zip Code Transaction ID: A161103D3FB6640399F1 MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Pioneer State Mutual Insurance Company Chairman Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Harlan W. Gingrich Date of Receipt Mailing Address 1510 N Elms Rd 06 03 2014 City State Zip Code Transaction ID: AAB950E2B914143DF8E3 MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Pioneer State Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 638.47 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 22 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Yvette Gonzales Date of Receipt Mailing Address 3030 N 3rd St 06 2014 City Zip Code State Transaction ID: AE5A69B7525D74F2E8D6 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Senior Vice President & CIO CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 208.35 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ms. Yvette Gonzales Date of Receipt Mailing Address 3030 N 3rd St 03 21 2014 City State Zip Code Transaction ID: AC70B7F5DB7964CDCA65 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Senior Vice President & CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jimi Grande Date of Receipt Mailing Address 122 C St NW Ste 540 03 07 2014 City Zip Code State Transaction ID: A09C51E97BE43450F96B DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 113.64 С federal political committee. Name of Employer Occupation Senior Vice President-Federal and Poli National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 681.84 Other (specify) 196.98 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: PAGE 23 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jimi Grande Date of Receipt Mailing Address 122 C St NW Ste 540 2014 21 City Zip Code State Transaction ID: A8753C63B56D0457092B DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 113.64 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Senior Vice President-Federal and Poli Receipt For: Aggregate Year-to-Date ▼ Primary General 795.48 Other (specify) Full Name (Last, First, Middle Initial) B. Dana Hartle Date of Receipt Mailing Address PO Box 84 03 26 2014 City State Zip Code Transaction ID: A56DF89C7FCCC4CF89D7 PA Marble 16334-0084 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Farmers Mutual Fire Insurance Company Vice Chairman Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Warren W. Heck Date of Receipt Mailing Address 200 Madison Ave 03 03 2014 City Zip Code State Transaction ID: A2B9D947375FE4732846 NY New York 10016-3903 Amount of Each Receipt this Period FEC ID number of contributing 2600.00 С federal political committee. Name of Employer Occupation Chairman & CEO Greater New York Mutual Insurance Comp Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) 3113.64 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

-9

	FOF	FOR LINE NUMBER: PAGE 24 OF								64
Use separate schedule(s)	(che	(check only one)								
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Mailing Address 222 Ames St		Date of Receipt
City Dedham FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify)	State Zip Code MA 02026-1850 C Occupation President & CEO Aggregate Year-to-Date ▼	Transaction ID: A0027B14E63E24C378C7 Amount of Each Receipt this Period 45.00
Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Mailing Address 222 Ames St City Dedham FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MA 02026-1850 C Occupation President & CEO Aggregate Year-to-Date ▼ 270.00	Date of Receipt 03 24 2014 Transaction ID: A66C89B3387E548BBAAE Amount of Each Receipt this Period 45.00
Full Name (Last, First, Middle Initial) Mr. A. Michael Heister Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-0111 C Occupation Director Aggregate Year-to-Date ▼ 250.00	Date of Receipt 03
SUBTOTAL of Receipts This Page (optional)	•	340.00
TOTAL This Period (last page this line number	r only)	

	FOR LINE NUMBER: PAGE 25 OF	64
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b 11c 12	
,	13 14 15 16	17

	Statements may not be sold or used by any perse name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Michaele Hobson Mailing Address 1510 N Elms Rd		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Flint FEC ID number of contributing federal political committee. Name of Employer Pioneer State Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48532-2033 C Occupation Director Aggregate Year-to-Date ▼ 300.00	Transaction ID : A5FCE530CEF9C40A2B52 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Mr. H. Christman Howell Mailing Address 1 Commerce Sq City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103-1415 C Occupation Commercial Lines Underwriter Aggregate Year-to-Date ▼ 500.00	Date of Receipt 03 11 2014 Transaction ID : AB9D7090EEC6E4B2CA18 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Harold Jamison Mailing Address 1 Commerce Sq City Philadelphia FEC ID number of contributing federal political committee. Name of Employer Pennsylvania Lumbermens Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code PA 19103-7042 C Occupation VP, Regulatory Affairs Aggregate Year-to-Date ▼ 325.00	Date of Receipt 03 18 2014 Transaction ID : AC0A9FD310F4847869FD Amount of Each Receipt this Period 325.00
SUBTOTAL of Receipts This Page (optional)	>	1125.00
TOTAL This Period (last page this line number	only)	

	FOR LINE NUMBER: PAGE 26 C	OF 64
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	13 14 15 16	17

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Rick Jones Mailing Address 3030 N 3rd St		Date of Receipt
City	State Zip Code	03 06 2014 Transaction ID : AECF8E89608F7403AB72
Phoenix	AZ 85012-3074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President & COO Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. Rick Jones Mailing Address 3030 N 3rd St		Date of Receipt
City Phoenix FEC ID number of contributing federal political committee.	State Zip Code AZ 85012-3074	03 21 2014 Transaction ID : AE00A42250BB34CB7BF0 Amount of Each Receipt this Period 42.00
Name of Employer CopperPoint Mutual Insurance Company Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Executive Vice President & COO Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Karol Mailing Address 122 C St NW Ste 540		Date of Receipt 03 07 2014
City Washington	State Zip Code DC 20001-2102	Transaction ID : A6D235110EBC246C0914 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.46
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Federal Affairs Counsel Aggregate Year-to-Date ▼ 272.76	
SUBTOTAL of Receipts This Page (optional)		129.46
TOTAL This Period (last page this line numbe	r only)	

	FOF	R LINE	NU	MBER	:	PAGE	2	27 OF	=	64
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
,		13		14		15		16		17

	NAME OF COMMITTEE (In Full)		
\rangle	National Association of Mutual	Insurance Companies PAC	
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas Karol		Date of Receipt
	Mailing Address 122 C St NW Ste 540		03 21 / Y Y Y Y Y
	City Washington	State Zip Code DC 20001-2102	Transaction ID : ACC3472978EF549FBB6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.46
	Name of Employer National Association of Mutual Insuran	Occupation Federal Affairs Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 318.22	
В.	Full Name (Last, First, Middle Initial) Mr. David Kaufman		Date of Receipt
	Mailing Address 471 E Broad St		03 05 2014
	City Columbus	State Zip Code OH 43215-3842	Transaction ID : AEACD9E74D8F2431FBE Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer Motorists Mutual Insurance Company	Occupation CEO & President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
	Full Name (Last, First, Middle Initial) Ms. Jami Kelly		Date of Receipt
	Mailing Address One Mutual Avenue		03 14 _ 2014 _
	City Frankenmuth	State Zip Code MI 48787-0001	Transaction ID : A81BB062EC94E465BAE Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.00
	Name of Employer	Occupation	
	Frankenmuth Mutual Insurance Company Receipt For:	Director, Commercial Lines Underwritin Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	234.00	
	UBTOTAL of Receipts This Page (optional)		2584.46

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 28 OF 64

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Jami Kelly Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48787-0001 C Occupation Director, Commercial Lines Underwritin Aggregate Year-to-Date ▼ 273.00	Date of Receipt 03 28 2014 Transaction ID: AFBC7F32BF7F344FFA37 Amount of Each Receipt this Period 39.00
Full Name (Last, First, Middle Initial) Mr. James J. Kennedy CPCU, LUT Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code OH 44820-0111 C Occupation President & CEO Aggregate Year-to-Date ▼ 2500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Kraig T. Klopfenstein Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Sales/Marketing Aggregate Year-to-Date ▼	Date of Receipt 03 03 2014 Transaction ID : A94EFE23C7AD647E5B2C Amount of Each Receipt this Period 75.00
SUBTOTAL of Receipts This Page (optional)	•	2614.00
TOTAL This Period (last page this line numbe	r only)	

	FOF	R LINE	NU	MBER	:	PAGE	2	29 OF	:	64
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen Mailing Address One Mutual Avenue City Frankenmuth	State Zip Code MI 48787-0001	Date of Receipt 03 14 2014 Transaction ID : AA9E6DBBCD16F436A8C8 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	Occupation Vice President, Claims Aggregate Year-to-Date 228.00	38.00
Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen Mailing Address One Mutual Avenue City Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48787-0001 C Occupation Vice President, Claims Aggregate Year-to-Date ▼ 266.00	Date of Receipt 03 28 2014 Transaction ID : A8696DC1813C04F0A93B Amount of Each Receipt this Period 38.00
Full Name (Last, First, Middle Initial) Ms. Lisa Lott Mailing Address 1510 N Elms Rd City Flint FEC ID number of contributing federal political committee. Name of Employer Pioneer State Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48532-2033 C Occupation Vice President/Treasurer Aggregate Year-to-Date ▼ 300.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		376.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 30 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Diane Marshall Date of Receipt Mailing Address PO Box 30660 03 2014 City Zip Code State Transaction ID: A820AA5B4A9B9449584F Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 03 14 2014 City State Zip Code Transaction ID: AA424E90C32514D409F9 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 230.82 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 03 28 2014 City State Zip Code Transaction ID: A6638EC4319634C68A04 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee. Name of Employer Occupation Vice President, IT Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 269.29 Other (specify) 176.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 31 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joseph McCrea Date of Receipt Mailing Address 1 Commerce Sq 2014 City Zip Code State Transaction ID: AAFE0DEDCE44149E898F PΑ Philadelphia 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Senior Vice President- Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph M. McGurrin Jr. Date of Receipt Mailing Address 1 Commerce Sq 03 2014 11 City State Zip Code Transaction ID: A4889A374432E47F78F2 Philadelphia PA 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 03 03 2014 City State Zip Code Transaction ID: A7FAD468D860B4F4291C MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 575.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 32 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod Date of Receipt Mailing Address One Mutual Avenue 2014 City Zip Code State Transaction ID: AAF0E7D06573B43B38EC Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 231.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian S. McLeod Date of Receipt Mailing Address One Mutual Avenue 03 28 2014 City State Zip Code Transaction ID: AD6A33572DAC143D790C Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 269.50 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Tricia A. Mickley CPA, PFMM Date of Receipt Mailing Address PO Box 31 03 26 2014 City State Zip Code Transaction ID: A51D245FE91E248BEB90 IL **Mount Carroll** 61053-0031 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Mount Carroll Mutual Fire Insurance Co Secretary/Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1077.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER: PAGE 33 OF								64
Use separate schedule(s)	(ch	eck only	or or	ne)					
for each category of the Detailed Summary Page	<u> </u>	1 1a		11b		11c		12	
		13		14		15		16	17

	Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. David Middleton Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Vice President - Finance Aggregate Year-to-Date ▼ 240.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. David Middleton Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Vice President - Finance Aggregate Year-to-Date ▼ 280.00	Date of Receipt 03 21 2014 Transaction ID : AB7757152A0F14A5BA75 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Mailing Address 1725 Hopley Ave City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-3569 C Occupation Assistant Vice President-Quality Servi Aggregate Year-to-Date ▼ 225.00	Date of Receipt 03 18 2014 Transaction ID : AF9B99AEF92AE4818AA8 Amount of Each Receipt this Period 45.00
SUBTOTAL of Receipts This Page (optional).	•	125.00
TOTAL This Period (last page this line number	er only)	

	FOR LINE NUMBER: PAGE	34 OF
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c	12
	13 14 15	16

64

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Mailing Address 1725 Hopley Ave City	State Zip Code	Date of Receipt 03 26 2014 Transaction ID : A4F274B086BD64ABB9C2
Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	OH 44820-3569 C Occupation Assistant Vice President-Quality Servi Aggregate Year-to-Date 270.00	Amount of Each Receipt this Period 45.00
Full Name (Last, First, Middle Initial) Mr. Eric Nelson Mailing Address 1460 Wells St City Enumclaw FEC ID number of contributing federal political committee. Name of Employer Mutual of Enumclaw Insurance Company Receipt For: Primary General Other (specify)	State Zip Code WA 98022-3003 C Occupation President & CEO Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Robert F. Ohler Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Senior Vice President Aggregate Year-to-Date ▼ 277.80	Date of Receipt 03 14 2014 Transaction ID : ABDB20D399ED24011A4A Amount of Each Receipt this Period 83.34
SUBTOTAL of Receipts This Page (optional)		378.34
TOTAL This Period (last page this line number	only)	

	FOR LINE N	NUMBER:	PAGE	E 35 O)F 6
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ugo	13	14	15	16	

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Tony Paris Mailing Address 1510 N Elms Rd		Date of Receipt
City	Stata 7in Codo	03 06 2014 Towns of the IR ACCASE A FIZE PART A 22 A
City Flint	State Zip Code MI 48532-2033	Transaction ID : A66A6DAF7FB1D43A3AD3 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	1
Pioneer State Mutual Insurance Company	Vice President, CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John A. Paul PFMM		Date of Receipt
Mailing Address PO Box 498		03 19 2014
City	State Zip Code	Transaction ID : AC3D4371F1CA2475DB0F
Council Bluffs	IA 51502-0498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Western Iowa Mutual Insurance Associat	Occupation President	-
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate real-to-bate ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Susan Porter	·	Date of Receipt
Mailing Address PO Box 111		03 25 2014
City Bucyrus	State Zip Code OH 44820-0111	Transaction ID : A020813AFC92C4CDE9AF Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Ohio Mutual Insurance Company	Director	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number		

	FOR LINE NUMBER:				PAGE	Ξ ;	36 OF	=	64	
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
zotanou oummary r ago		13		14		15		16		17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Jonathan R. Riekse Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Senior Vice President, Personal Lines Aggregate Year-to-Date ▼ 249.00	Date of Receipt 03 03 2014 Transaction ID: A6DAC3CB1E55543E290F Amount of Each Receipt this Period 83.00
Full Name (Last, First, Middle Initial) Mr. L. Gerald Roach CPCU, FLMI Mailing Address PO Box 6927 City Richmond FEC ID number of contributing federal political committee. Name of Employer Mutual Assurance Society of Virginia Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code VA 23230-0927 C Occupation President Aggregate Year-to-Date ▼ 670.00	Date of Receipt 03 03 2014 Transaction ID: AB907D76C48F44B488AE Amount of Each Receipt this Period 210.00
Full Name (Last, First, Middle Initial) Mr. Kent B. Shantz Mailing Address PO Box 5626 City Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code IL 61125-0626 C Occupation COO Aggregate Year-to-Date ▼ 234.00	Date of Receipt 03 05 2014 Transaction ID: A31DF9C0F7A14422AA3A Amount of Each Receipt this Period 78.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	371.00
TOTAL This Period (last page this line number	er only)	

	FOR LINE NUMBER:	PAGE 37 OF 6
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b	11c 12
	13 14	15 16

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Kent B. Shantz		Date of Receipt
Mailing Address PO Box 5626		03 26 2014
City	State Zip Code	Transaction ID : A176E2E08D5094CBDADD
Rockford	IL 61125-0626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer	Occupation	1
Rockford Mutual Insurance Company	coo	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	35 5	
Other (specify) ▼	312.00	
Full Name (Last, First, Middle Initial) Mr. Steven C. Sliver CPA	•	Date of Receipt
Mailing Address PO Box 577		03 25 _2014 _
City	State Zip Code	Transaction ID : A9732ACBCCD084214BB7
Huntingdon	PA 16652-0577	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	625.00
Name of Employer	Occupation	
Mutual Benefit Insurance Company	CEO]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	30 0	
Other (specify) ▼	625.00	
Full Name (Last, First, Middle Initial) C. Mr. Donald A. Smith Jr.		Date of Receipt
Mailing Address 3030 N 3rd St		03 06 2014
City	State Zip Code	Transaction ID : A917927CA5026425B9C2
Phoenix	AZ 85012-3074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	105.00
Name of Employer	Occupation	-
CopperPoint Mutual Insurance Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	525.00	
SUBTOTAL of Receipts This Page (optional)		808.00
TOTAL This Period (last page this line number	r only)	
TOTAL THIS I CHOO (Idst page this line humbe	,, orny,	

	FOR LINE NUMBER:	PAGE 38 OF 6	4
Use separate schedule(s) for each category of the	(check only one)	<u></u>	
Detailed Summary Page	X 11a 11b	11c 12	
,	13 14	15 16 1	7

Full Name (Last, First, Middle Initial) Mr. Donald A. Smith Jr. Mailing Address 3030 N 3rd St	Mr. Donald A. Smith Jr.	
City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code AZ 85012-3074 C Occupation President & CEO Aggregate Year-to-Date ▼ 630.00	O3 21 2014 Transaction ID: A4F09E288B1834CA5B5 Amount of Each Receipt this Period 105.00
Full Name (Last, First, Middle Initial) Ms. Irica Solomon Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2102 C Occupation Vice President of Federal and Politica Aggregate Year-to-Date ▼ 272.76	Date of Receipt 03 07 2014 Transaction ID: ACF200DFAE4D642AA8 Amount of Each Receipt this Period 45.46
Full Name (Last, First, Middle Initial) Ms. Irica Solomon Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2102 C Occupation Vice President of Federal and Politica Aggregate Year-to-Date ▼ 318.22	Date of Receipt Max

	FO	R LINE	NU	IMBER	:	PAGE	Ξ (39 O	F	64
Use separate schedule(s)	(che	eck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. John R. Spielberger Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Executive Vice President & General Cou Aggregate Year-to-Date ▼ 277.80	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Paul G. Stueven PFMM Mailing Address 118 Downtown Plz City Fairmont FEC ID number of contributing federal political committee. Name of Employer Fairmont Farmers Mutual Insurance Comp Receipt For: Primary General Other (specify)	State Zip Code MN 56031-4461 C Occupation COO/Treasurer Aggregate Year-to-Date ▼ 2000.00	Date of Receipt 03 25 2014 Transaction ID: A1F01E65B2B414352B72 Amount of Each Receipt this Period 2000.00
Full Name (Last, First, Middle Initial) Mr. Tim F. Sullivan RPLU Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer NAMIC Insurance Company, Inc. Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation President & CEO Aggregate Year-to-Date ▼ 576.90	Date of Receipt 03 07 2014 Transaction ID: A968D90459E774B2AABC Amount of Each Receipt this Period 96.15
SUBTOTAL of Receipts This Page (optional)		2179.49
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 40 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 2014 21 City Zip Code State Transaction ID: A809092869BB14ABB9A9 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 96.15 federal political committee. Name of Employer Occupation President & CEO NAMIC Insurance Company, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 673.05 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Douglas M. Sullivan CIC, PFMM Date of Receipt Mailing Address PO Box 37 03 21 2014 City State Zip Code Transaction ID : A97D9272FB23E4D17800 IL Orion 61273-0037 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Svea Mutual Insurance Company Manager/Secretary/Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 03 07 2014 City Zip Code State Transaction ID: A0F91BE52068D4D939B7 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Membership/Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 252.63 Other (specify) 436.15 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 41 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 2014 21 City Zip Code State Transaction ID: AC7421711D9C34640A3A Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - Membership/Insurance National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 292.63 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Susan K. Taggart PFMM Date of Receipt Mailing Address PO Box 68 03 13 2014 City State Zip Code Transaction ID: A1B86F709861F453080B IN Remington 47977-0068 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Remington Farmers Mutual Insurance Com CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 03 03 2014 City Zip Code State Transaction ID: AA5B7548964834A04A88 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 390.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER: PAGE 42	OF 64
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	13 14 15 16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 07 2014 City Zip Code State Transaction ID: A3BAD6673DD9A49B39DC IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - State Affairs National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 03 21 2014 City State Zip Code Transaction ID: A8204F7D767A041E5A33 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - State Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kenneth G. Thompson Date of Receipt Mailing Address 200 N Main St 20 03 2014 City Zip Code State Transaction ID: A0DD4972D6D814961BC1 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Assistant Vice President-Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

- 9

330.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 43 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Gary W. Thompson CPCU, CIC Date of Receipt Mailing Address PO Box 618 03 2014 City Zip Code State Transaction ID: ADD8B601D53D44FBF9E1 MO Columbia 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation President/CEO Columbia Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 03 14 2014 City State Zip Code Transaction ID: AFFBCB0CDEAC248E8ADI MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President of Administration Receipt For: Aggregate Year-to-Date ▼ Primary General 234.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 03 28 2014 City Zip Code State Transaction ID: A19E156600C634081899 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 39.00 С federal political committee. Name of Employer Occupation Vice President of Administration Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 273.00 Other (specify) 278.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

SCHEDULE A (FEC Form 3X) 17

FOR LINE NUMBER: PAGE 44 OF 64

onebole A (Leo Lonn ox)		1 011		NONDE	i. I Au	_ ++ 0	1 0-1	
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	×	ck only 11a 13	y one) 11b 14	11c	12 16	17	,
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) National Association of Mutual Insurance	e Companies PAC		·					

Α.	Full Name (Last, First, Middle Initial) Mr. Aaron J. Valentine		Date of Receipt
	Mailing Address 1 Preferred Way		03 18 2014
	City	State Zip Code	Transaction ID : A88440D4240DC482FA4D
	New Berlin	NY 13411-1896	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer	Occupation	
	Preferred Mutual Insurance Company	Senior Vice President, Treasurer & CFO	
	Receipt For:	Aggregate Year-to-Date ▼	7
	Primary General Other (specify) ▼	280.00	
	Full Name (Last, First, Middle Initial) Mr. Mick Ware		Date of Receipt
	Mailing Address PO Box 5555		03 14 _ 2014 _
	City	State Zip Code	03
	Meridian	ID 83680-5555	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer	Occupation	_
	United Heritage Property & Casualty Co	President & CEO	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	2500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Mark Wenger		Date of Receipt
	Mailing Address PO Box 30660		03 03 2014
	City	State Zip Code	Transaction ID : AA0A7C74E8FA944D2A07
	Lansing	MI 48909-8160	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	84.00
	Name of Employer	Occupation	
	Auto-Owners Insurance Company	Assistant Vice President and Chief P&C	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	252.00	
			2664.00

	FOR LI	NE NU	JMBER	:	PAGE	- 4	45 OF	:	64
Use separate schedule(s)	(check of	only or	ne)						
for each category of the Detailed Summary Page	X 118	ì	11b		11c		12		
	13		14		15		16		17

	Statements may not be sold or used by any personal parties and address of any political committee to		
NAME OF COMMITTEE (In Full) National Association of Mutual I	Insurance Companies PAC		
Full Name (Last, First, Middle Initial) Mr. Daniel West Mailing Address 1510 N Elms Rd	Mr. Daniel West		
City	State Zip Code	03 06 2014 Transaction ID : A3132BB4D1A2D4B1B9	
Flint	MI 48532-2033	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	300.00	
Name of Employer Pioneer State Mutual Insurance Company Receipt For: Primary General Other (specify)	Occupation Director Aggregate Year-to-Date ▼ 300.00		
Full Name (Last, First, Middle Initial) B. Mr. William Woodbury Mailing Address (1404 Access i Blade)		Date of Receipt	
Mailing Address 6101 Anacapri Blvd City Lansing FEC ID number of contributing	State Zip Code MI 48917-3968	03 03 2014 Transaction ID: A80EF3422C56E470988 Amount of Each Receipt this Period 84.00	
Receipt For: Primary Other (specify) Rederal political committee. Receipt For: General Other (specify) Other (specify) Other (specify)	Occupation SVP, Assoc. Secretary & Assoc. General Aggregate Year-to-Date ▼ 252.00		
Full Name (Last, First, Middle Initial) Mr. Thomas Woolley		Date of Receipt	
Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code OH 44820-0111 C Occupation Director-Vice Chairman-Secretary Aggregate Year-to-Date ▼ 500.00	Transaction ID: A841B8E409AEF48D6A Amount of Each Receipt this Period 500.00	
SUBTOTAL of Receipts This Dags (antique)		884.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u>_</u> _		

FOR LINE NUMBER: PAGE 46 OF 64 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Robert M. Zak Date of Receipt Mailing Address 250 Main St 2014 City Zip Code State Transaction ID: ACD6EED259DF8430C989 NY Buffalo 14202-4188 Amount of Each Receipt this Period FEC ID number of contributing C 2500.00 federal political committee. Name of Employer Occupation President & CEO Merchants Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerry G. Zenke PFMM Date of Receipt Mailing Address PO Box 708 03 26 2014 City State Zip Code Transaction ID: A9E56CCC930A241929BD MN Houston 55943-0708 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Mound Prairie Mutual Insurance Company General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 3500.00 SUBTOTAL of Receipts This Page (optional)..... 37889.18 TOTAL This Period (last page this line number only).....

S П

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 OF 64 (check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17					
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	Name of Committee (In Full) National Association of Mutual	Insurance	e Companies PAC						
Α.	Full Name (Last, First, Middle Initial) NAMIC Administrative Fund			Date of Receipt					
	Mailing Address 3601 Vincennes Rd			03 24 2014					
	City Indianapolis	State IN	Zip Code 46268-1154	Transaction ID : A2EA11CEFDAFC45CC94					
	FEC ID number of contributing federal political committee.	C	10250 1101	Amount of Each Receipt this Period 45.00					
	Name of Employer	Occupation	1	Reimb. of bank fees					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 873.99						
_	Full Name (Last, First, Middle Initial)								
	Mailing Address		Date of Receipt						
	City	State	Zip Code						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer	Occupation	1	_					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼						
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt					
Ο.	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer	Occupation	1						
	Receipt For: Primary General Other (specify)								
s	UBTOTAL of Receipts This Page (optional)			45.00					
Ļ	OTAL This Pariod (last nage this line number	only)		45.00					

TOTAL This Period (last page this line number only).....

17

SCHEDULE B (FEC Form 3X)	11	FOR LINE	PAGE 48 OF 64	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orli)		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or us	sed by any pers	on for the purpose of	f soliciting contributions
\	The and address of any politi	car committee to	Solicit contributions	irom such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual Ins	urance Companies	PAC		
Full Name (Last, First, Middle Initial)				
A. American Express			Date of Disburser	
Mailing Address PO Box 981540			03 31	2014
City	State Zip Code		Transaction ID :	B20083B43E5C94848855
El Paso	TX 79998-1540		Transaction ib .	D20003D+3E303+0+0033
Purpose of Disbursement Credit Card Processing Fees			Amount of Each [Disbursement this Period
Candidate Name		Category/ Type		146.25
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼			
State: District:	·			
Full Name (Last, First, Middle Initial)				
B. American Express			Date of Disburser	
Mailing Address PO Box 981540			03 31	
City	State Zip Code		Tuanaatian ID	. DCCCC72DC0C4C4CDCA2
El Paso	TX 79998-1540		ו Transaction וט	B6C5F73DE061E4EBCA3
Purpose of Disbursement Credit Card Processing Fees			Amount of Each [Disbursement this Period
Candidate Name		Category/ Type		2.03
Office Sought: House Disburse	ment For:	, , , , , , , , , , , , , , , , , , ,		
Senate	Primary General			
State: President District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Date of Disburser	nont
C. Aristotle				
Mailing Address 205 Pennsylvania Ave SE			03 / 03	
City	State Zip Code			D0040-0
Washington	DC 20003-1164		Transaction ID :	B961C723755664C78817
Purpose of Disbursement Credit Card Processing Fees			Amount of Each [Disbursement this Period
Candidate Name		Category/ Type	7 and and 51 East 1	158.75
Office Sought: House Disburse	ment For:	1,700		7
Senate President	Primary General Other (specify)			
State: District:	- · · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional).		·····		307.03
TOTAL This Period (last page this line number only	·)			

S ľ

S	CHEDULE B (FEC Form 3X)			F	OR I	LINE I	NUMBEF	₹:			PAGE	49 ()F	64
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(c		only		_	7					
			ummary Page		×	21b 27	22 28a	\vdash	23 28b		24 28c	25 29		26 30b
Γ.	ny information copied from such Reports and Staten	onto mou no	at he cold or up	od by	onv					of or			tions	
	for commercial purposes, other than using the nam													'
\setminus	NAME OF COMMITTEE (In Full)													
	National Association of Mutual Insu	rance Co	ompanies F	PAC										
_	Full Name (Last, First, Middle Initial)													
Α.	Aristotle						Date	of Di	sburse	_				
	Mailing Address 205 Pennsylvania Ave SE						03	WI 7	1			2014	Y	
	•		Zip Code				Tran	sact	ion ID	: BI	E530539	625C24	16A9	B5D
	Washington Purpose of Disbursement	DC	20003-1164					ouot	.02			02002	0710	
	Credit Card Processing Fees			Г			Amou	nt of	Each	Dist	ourseme	nt this	Perio	od
	Candidate Name				egor	y/			-				.25	\neg
	Office Sought: House Disbursen	ent For:		Т	уре			_	7	_	7		0	_
		Primary	General											
	President	Other (specif	fy) 🔻											
_	State: District:													
В.	Full Name (Last, First, Middle Initial)						Date	of Di	sburse	mor	nt			
٥.	Chase Bank						M		D			Y	Υ	
	Mailing Address 8751 Michigan Rd						03			3		2014		
	Indianapolis	State IN	Zip Code 46268-3141				Trar	sact	ion ID	: B	52D1012	E99514	18FF	BF1
	Purpose of Disbursement Credit Card Processing Fees						Amou	nt of	Each	Disk	ourseme	nt this	Perio	od
	Candidate Name			Cat	egor	v/		-	-	-			- 40	\neg
	0.00				ype			-	7		7	4:	5.13	_
	Office Sought: House Disbursen Senate	nent For: Primary	General											
		Other (specif												
	State: District:													
_	Full Name (Last, First, Middle Initial)						Data	- t D:	-		.1			
C.	NAMIC Administrative Fund						Date	_	sburse			Y	V	
	Mailing Address 3601 Vincennes Rd						03	,	2	_		2014	1	
	•		Zip Code				Tran	sact	ion ID	: B6	600AD86	67017B	4DE	1808
	Indianapolis Purpose of Disbursement	IN	46268-1154					ouo		`	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,		.000
	Refund of offset operating expenditure received 2/19	9/2014				71	Amou	nt of	Fach	Dist	ourseme	nt this	Perio	nd
	Candidate Name				egor ype	y/			4		40.		3.99	
	Office Sought: House Disbursen													
		Primary	General											
	State: District:	Other (specif	y/ ▼											
Г							_	-	-		-		-	=
5	SUBTOTAL of Disbursements This Page (optional)					•	L		7		,	875	.37	
Ι.	OTAL This David /lest name this lies assets at 1					_			-			1182	.40	
Ι'	'OTAL This Period (last page this line number only)				•••••			-	7		7		ب	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Sta or for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full)			
National Association of Mutual In	surance Companies	PAC	
Full Name (Last, First, Middle Initial)			
A. ANN WAGNER FOR CONGRES	S		Date of Disbursement
Mailing Address PO BOX 50			03 11 2014
City	State Zip Code		Transaction ID : B6B3CFED8020448A599F
BALLWIN Purpose of Disbursement	MO 63022		
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	0500.00
Rep. Ann L. Wagner		Туре	2500.00
Senate President	sement For: 2014 Primary General Other (specify)		
State: MO District: 02			
Full Name (Last, First, Middle Initial) B. Blaine for Congress			Date of Disbursement
Mailing Address PO Box 1025			03 27 7 2014
City Jefferson City	State Zip Code MO 65102-1025		Transaction ID : BC0163ECFF82A4F27BD9
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name Rep. Blaine Luetkemeyer		Category/ Type	1000.00
	sement For: 2014	1,700	
Senate President State: MO District: 03	Primary		
State: MO District: 03 Full Name (Last, First, Middle Initial)			
C. CAPITO FOR WEST VIRGINIA			Date of Disbursement
Mailing Address PO BOX 11519			03 27 2014
City CHARLESTON	State Zip Code WV 25339		Transaction ID : BA3FD535AA0A94A48B7
Purpose of Disbursement Political Contribution	2000		
Candidate Name			Amount of Each Disbursement this Period
Shelley Moore Capito		Category/ Type	1000.00
·	ement For: 2014 Primary General Other (specify) ▼		
State: WV District:			
SUBTOTAL of Disbursements This Page (optional)	<u> </u>	4500.00
TOTAL This Period (last page this line number or	ıly)		

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 51 OF 64
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🔀 23 🗌 24 📗 25 📄 26
	, ,	27	28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or use ne and address of any politica	ed by any perso al committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Mutual Insu	ırance Companies P	AC	
Full Name (Last, First, Middle Initial)			
A. Capuano for Congress Committee			Date of Disbursement
Mailing Address PO Box 440305			03 11 2014
City	State Zip Code		Transaction ID - DOODE7CA 000D040F0AC0
Somerville	MA 02144		Transaction ID: B09BF76A099D942F0A60
Purpose of Disbursement Political Contribution		· · ·	Amount of Each Disbursement this Period
Candidate Name		Category/	0500.00
Rep. Michael E. Capuano		Type	2500.00
	nent For: 2014 Primary General Other (specify)		
State: MA District: 07	, , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)			
B. Chris Gibson for Congress			Date of Disbursement
Mailing Address PO Box 234			03 11 2014
Saratoga Springs	State Zip Code NY 12866		Transaction ID: B34AFB1230C1B498788A
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Chris P. Gibson		Туре	1000.00
	nent For: 2014 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)		_	
C. CHUCK FLEISCHMANN FOR COI	NGRESS COMMITT	EE, INC.	Date of Disbursement
Mailing Address P.O. BOX 11091			03 / 27 / 2014
City	State Zip Code		
CHATTANOOGA	TN 37401		Transaction ID: B10B53AF53BEA454BB02
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Lacif Disbursement this Feriod
Rep. Chuck J. Fleischmann		Type	1000.00
Senate President	nent For: 2014 Primary General Other (specify)		
State: TN District: 03			
SUBTOTAL of Disbursements This Page (optional)		······	4500.00
TOTAL This Period (last page this line number only)		·····•	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 52 OF 64	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Sta or for commercial purposes, other than using the r					
NAME OF COMMITTEE (In Full)					
National Association of Mutual In	surance Companies	PAC			
Full Name (Last, First, Middle Initial)					
A. Citizens for Prosperity in America	a Today Pac		Date of Disbursemer	nt / Y Y Y Y Y	
Mailing Address 228 S Washington St Ste 115	03 11	2014			
City Alexandria		Transaction ID : BI	B1AB8A6E9557403BA9D		
Purpose of Disbursement Political Contribution			Amount of Each Disk	oursement this Period	
Candidate Name		Category/ Type		2500.00	
Office Sought: House Disbur Senate President	sement For: 2014 Primary General ✓ Other (specify) ▼	Турс		,	
State: District:	Other2014				
Full Name (Last, First, Middle Initial) B. CITIZENS FOR WATERS			Date of Disbursemer		
Mailing Address 3700 WILSHIRE BLVD., STE. 1	050-B		03 11	2014	
City LOS ANGELES	State Zip Code CA 90010		Transaction ID : B	EE663CED77E44057877	
Purpose of Disbursement Political Contribution			Amount of Each Disk	oursement this Period	
Candidate Name Rep. Maxine Waters		Category/		1000.00	
	sement For: 2014	Туре			
	Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) C. Cleaver for Congress			Date of Disbursemer	nt	
Mailing Address 4801 Main Street, Stuite 1000	Mailing Address 4801 Main Street, Stuite 1000				
City Kansas City	State Zip Code MO 64112		Transaction ID : B	38D1E1CCDE3E40EAAE	
Purpose of Disbursement Political Contribution		· · · ·	Amount of Each Disk	oursement this Period	
Candidate Name Rep. Emanuel Cleaver II				1000.00	
•	sement For: 2014 Primary General Other (specify)	Type			
State. IVIO DISTITUT. US					
SUBTOTAL of Disbursements This Page (optional	·			4500.00	
TOTAL This Period (last page this line number or	ıly)				

	CHEDULE B (FEC Form 3X)	Use separate sched	ule(e)	FOR LINE N					
IT _	EMIZED DISBURSEMENTS	for each category of Detailed Summary F	the	(check only 21b 27	one) 22 28a	23 28b	24 28c	25 29	26 30b
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam								
\setminus	NAME OF COMMITTEE (In Full)	•							
$ \rangle$	National Association of Mutual Insu	irance Compani	ies P	AC .					
_	Full Name (Last, First, Middle Initial)								
Α.	COTTON FOR SENATE					Disbursen			
	Mailing Address PO BOX 379				03	11		2014	Y
		State Zip Code			Trans	action ID :	BF005C95	140084	FC9AF1
	Dardanelle Purpose of Disbursement	AR 72834-03	379		ITAIIS	action ib .	ы 003033	140004	i OJAI I
	Senate Political Contribution				Amount	of Each D	Disburseme	nt this F	Period
	Candidate Name			Category/				0500	00
	Rep. Tom Cotton			Type		-	7	2500	.00
	Senate	nent For: 2014 Primary Gene Other (specify) ▼	eral						
	State: AR District: 04								
В	Full Name (Last, First, Middle Initial)				Data of	Diahumaan			
В.	David Scott for Congress					Disbursen		V V	V
	Mailing Address PO Box 960821				03	27		2014	Y
	•	State Zip Code GA 30296			Trans	action ID :	B5E3C690	BBCD0	4C6F9EF
	Political Contribution				Amount	of Each D	Disburseme	nt this F	Period
	Candidate Name			Category/					
	Rep. David A. Scott			Туре		-	7	1000	.00
	Senate	nent For: 2014 Primary Gene Other (specify)	eral						
	Full Name (Last, First, Middle Initial)								
C.	Democratic Senatorial Campaign C	Committee			Date of	Disbursen	nent		
	Mailing Address 120 Maryland Ave NE				03	11		2014	Y
	•	State Zip Code			Trans	action ID :	BDFAD29	66C072	458B850
	Washington Purpose of Disbursement	DC 20002							
	Political Contribution		- 17		Amount	of Each [Disburseme	nt this F	Period
	Candidate Name			Category/ Type	Amount	or Euch E	7105011301110	15000	
		nent For: 2014							
		Primary Gene	eral						
	State: District:	Other (specify) ▼ Other:	2014						
Г		2.1101.							
H	SUBTOTAL of Disbursements This Page (optional)				<u> </u>	7	7	18500.	.00
ľ	'OTAL This Period (last page this line number only)								

SCHEDULE B (FEC Form 3X)		FOR LINE	E NUMBER: PAGE 54 OF 64				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	27	22 X 23 24 25 29 28a 28b 28c 29				
Any information copied from such Reports and Statem							
or for commercial purposes, other than using the nam	e and address of any polition	cal committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	ranga Campanias						
National Association of Mutual Insu	rance Companies	PAC					
Full Name (Last, First, Middle Initial)	- 1 0\		Data of Bishamana				
A. DEMOCRATS WIN SEATS (DWS I	PAC)		Date of Disbursement				
Mailing Address 1071 TWIN BRANCH LN			03 11 2014				
,	tate Zip Code		Transaction ID : B814198219000441B86				
Weston Purpose of Disbursement	FL 33326-2828		Transaction 15 : 5014130213000441500				
Political Contribution			Amount of Each Disbursement this Period				
Candidate Name		Category/	5000.00				
Office Sought: House Disbursem	ent For: 2014	Туре					
	Primary General						
	Other (specify) ▼						
State: District:	Other2014						
Full Name (Last, First, Middle Initial)			Data of Diskumannant				
B. Freedom Fund PAC			Date of Disbursement				
Mailing Address 701 8th Street, NW Suite 500			03 11 2014				
,	tate Zip Code		Transaction ID : B84203C344CFE43FB				
Washington Purpose of Disbursement	DC 20001						
Political Contribution			Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	2500.00				
	ent For: 2014						
	Primary General						
State: District:	Other (specify) ▼ Other2014						
Full Name (Last, First, Middle Initial)							
C. Friends of Bill Posey			Date of Disbursement				
Mailing Address PO Box 360877			03 11 2014				
City	tate Zip Code		Transaction ID - D7D2CFD04.445D44.02				
	FL 32936		Transaction ID: B7D36EB9A445D41C3				
Purpose of Disbursement Political Contribution							
Candidate Name		Category/	Amount of Each Disbursement this Period				
Rep. Bill Posey							
Office Sought: House Disbursem	ent For: 2014						
	Primary General						
	Other (specify) ▼						
State: FL District: 08							
SUBTOTAL of Disbursements This Page (optional)		·····	8500.00				
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X)	Has something to the	FOR LINE	FOR LINE NUMBER: PAGE 55 OF					
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of	the Contook on	(Gricok Grily Gric)					
	Detailed Summary P		22 X 23 28b	24 25 26 28c 29 30b				
Any information copied from such Reports and Stat	aments may not be sold							
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
$ \; angle$ National Association of Mutual In	surance Compani	es PAC						
/	<u> </u>							
Full Name (Last, First, Middle Initial)			Date of Disburseme	nt				
A. FRIENDS OF DAN KILDEE								
Mailing Address P.O. BOX 248			03 27	2014				
City	State Zip Code		Transaction ID : B	3E736267C9B74783A03				
FLINT Purpose of Disbursement	MI 48501		-					
Political Contribution			Amount of Each Dis	bursement this Period				
Candidate Name		Category/						
Rep. Dan T. Kildee		Type		1000.00				
	ement For: 2014							
	Primary Gene	eral						
State: MI District: 05	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
B. FRIENDS OF DAVE JOYCE			Date of Disburseme	nt				
			M = M / D = D	/				
Mailing Address 320 KENARDEN DRIVE			03 27	2014				
0''	7: 0 1							
City CLEVELAND	State Zip Code OH 44143		Transaction ID : B	42008C47DC7A4F69A39				
Purpose of Disbursement	4110		_					
Political Contribution			Amount of Each Dis	bursement this Period				
Candidate Name		Category/		1000.00				
Rep. Dave P. Joyce		Туре		1000.00				
	ement For: 2014 Primary Gene	oral						
President	Other (specify)	riai						
State: OH District: 14	Carlos (opens)							
Full Name (Last, First, Middle Initial)								
C. FRIENDS OF DENNIS ROSS			Date of Disburseme	nt				
			M M / D D	/ Y # Y # Y # Y				
Mailing Address 133 SOUTH HARBOR DRIVE			03 11	2014				
City	State Zip Code							
Venice	FL 34285-22	14	Transaction ID : B	D29C71B7D008411AB53				
Purpose of Disbursement Political Contribution			1					
			Amount of Each Dis	bursement this Period				
Candidate Name Rep. Dennis A. Ross		Category/		2000.00				
•	ement For: 2014	Туре						
Senate	Primary Gene	eral						
President	Other (specify)							
State: FL District: 15								
				4000.00				
SUBTOTAL of Disbursements This Page (optional)		················		4000.00				
TOTAL This Period (last page this line number on	w)							
I I I I I I I I I I I I I I I I I I I	у / · · · · · · · · · · · · · · · · · ·							

SCHEDULE B (FEC Form 3X)	Llon nonerate called - (-)	I	NUMBER: PAGE 56 OF 64			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 🔀 23 🗆 24	25 26		
	Detailed Summary Page	27	28a 28b 28c	29 30b		
Any information copied from such Reports and Stator for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	and address of any politic	oar committee to	CONOR COMMIDUMONS HOME SUCH	Jonninille G.		
National Association of Mutual Ins	surance Companies	PAC				
Full Name (Last, First, Middle Initial)			Data of Dieleuraansant			
A. FRIENDS OF DENNIS ROSS			Date of Disbursement	YYY		
Mailing Address 133 SOUTH HARBOR DRIVE				2014		
City	State Zip Code		Transaction ID : B4070493	5EBB24BD9B24		
Venice Purpose of Disbursement	FL 34285-2214					
Political Contribution			Amount of Each Disbursemen	nt this Period		
Candidate Name		Category/		F00 00		
Rep. Dennis A. Ross		Type		500.00		
Office Sought: House Disburs Senate President	ement For: 2014 Primary					
State: FL District: 15	_					
Full Name (Last, First, Middle Initial) B. FRIENDS OF JACK KINGSTON			Date of Disbursement			
Mailing Address PO BOX 2133				2014		
City SAVANNAH	State Zip Code GA 31402		Transaction ID : B7528A49	6B77346A9B37		
Purpose of Disbursement Political Contribution - Senate Committee			Amount of Each Disburseme	nt this Period		
Candidate Name		Category/		1000.00		
John H Kingston SR		Type		1000.00		
	ement For: 2014 ✓ Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial)			Date of Disbursement			
C. FRIENDS OF JOHN DELANEY				Y Y Y		
Mailing Address PO BOX 60320				2014		
City POTOMAC	State Zip Code MD 20859		Transaction ID : BC4D8E82	29EBFE45F292		
Purpose of Disbursement Political Contribution			Amount of Each Disburseme	at this David		
Candidate Name				nt this Period		
Rep. John K. Delaney		Category/ Type		1000.00		
Senate President	ement For: 2014 Primary General Other (specify)		,			
State: MD District: 06						
SUBTOTAL of Disbursements This Page (optional)		······		2500.00		
TOTAL This Period (last page this line number onl	y)					

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 57 OF 64
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🔀 23 🗌 24 📗 25 📄 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used e and address of any politica	d by any perso I committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Mutual Insu	rance Companies P	AC	
Full Name (Last, First, Middle Initial)			
A. Friends of Mark Warner			Date of Disbursement
Mailing Address 201 North Union Street Suite 300			03 11 2014
City	State Zip Code		Transaction ID - B00E2C22C7C664026040
Alexandria	VA 22314		Transaction ID : B00E2C22C7C664036949
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name	"	Category/	4000.00
Sen. Mark R. Warner		Type	4000.00
Senate	nent For: 2014 Primary		
State: VA District:	* * *		
Full Name (Last, First, Middle Initial)			
B. Guthrie for Congress			Date of Disbursement
Mailing Address PO Box 9639			03 / 11 / 2014
,	State Zip Code KY 42102		Transaction ID : B212DB3F998E2493A941
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name	,	Category/	1000.00
Rep. Brett Guthrie		Type	1000.00
	nent For: 2014		
	Primary General		
President	Other (specify) ▼		
State: KY District: 02			
Full Name (Last, First, Middle Initial) C. HELLER FOR SENATE			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 371907			03 27 2014
,	State Zip Code NV 89137		Transaction ID : B5D619D08E68A4140AF8
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each bisbursement this Feriod
Sen. Dean Heller		Type	1000.00
X Senate	nent For: 2018 Primary General Other (specify)		
State: NV District:			
SUBTOTAL of Disbursements This Page (optional)		······	6000.00
TOTAL This Period (last page this line number only)		·····	

	SCHEDULE B (FEC Form 3X)		parata cabadula(=)		E NUMBER: PAGE 58 OF 64						
IT	EMIZED DISBURSEMENTS	for each	parate schedule(s) category of the	(check or		X 23	24	25	<u>26</u>		
		Detailed	I Summary Page	27	28a	28b	28c	29	30b		
	ny information copied from such Reports and Staten										
or	for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	ie and add	dress of any politic	cal committee	to solicit co	ontributions	from such	committ	ee.		
$ \rangle$	National Association of Mutual Insu	ırance	Companies I	PAC							
L											
Δ	Full Name (Last, First, Middle Initial)				Date	of Disburser	ment				
Λ.	HUDSON FOR CONGRESS				M						
	Mailing Address PO BOX 5053				03	11		2014			
	City S	State	Zip Code								
	CONCORD	NC	28027		Tran	saction ID	: B697CAE	B14CA7	7472586E		
	Purpose of Disbursement										
	Political Contribution				Amour	nt of Each I	Disburseme	nt this F	Period		
	Rep. Richard L. Hudson Jr.			Category/ Type				1000	0.00		
	Office Sought: House Disbursen	nent For:	2014	туре	-	,					
	Senate	Primary	General								
	State: NC District: 08	Other (sp	ecify) 🔻								
_	State: NC District: 08 Full Name (Last, First, Middle Initial)										
В.	•				Date of	of Disburser	ment				
					M = N	/ D	D / Y	YY	Υ		
	Mailing Address 1709 State Route 560 South				03	31	1	2014			
	•	State OH	Zip Code 43078		Tran	saction ID	: B08F5F03	1D8F44	1021848		
	Urbana Purpose of Disbursement	011	43076								
	Political Contribution				Amour	nt of Each I	Disburseme	nt this F	Period		
	Candidate Name			Category/				2500	0.00		
	Rep. Jim D. Jordan Office Sought: House Disbursen	nent For:	2014	Type		-	,				
	Senate	Primary	General								
		Other (sp	ecify) 🔻								
_	State: OH District: 04										
C.	Full Name (Last, First, Middle Initial) Jobs, Economy and Budget Fund (IFR FI	IND)		Date of	of Disburser	ment				
					M N	/ D	D / Y	YY	Υ		
	Mailing Address PO Box 30844				03	11	Ц L.	2014			
	City S	State	Zip Code		_						
	Bethesda	MD	20824		Tran	saction ID	: B228A145	57B6D4	494EB3B		
	Purpose of Disbursement Political Contribution										
	Candidate Name			Oatamanii	Amour	nt of Each I	Disburseme	nt this I	Period		
				Category/ Type				5000	0.00		
	Office Sought: House Disbursen										
	Senate President	Primary Other (sp	General								
	State: District:	Other (op	Other2014								
Г	'										
s	UBTOTAL of Disbursements This Page (optional)		<u></u>	······				8500	.00		
_	OTAL This Period (last page this line number only)										
ι'	The fine follow (last page tills lille fluthber offly)		• • • • • • • • • • • • • • • • • • • •			- 1	- 1				

SCHEDULE B (FEC Form 3X)	Lies congrete cohodule(a)					FOR LINE NUMBER: PAGE 59					
ITEMIZED DISBURSEMENTS	for each o	cate schedule(s) category of the Summary Page	(check only 21b 27	one) 22 28a	X 23 28b	24 28c	25 29	26 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full) National Association of Mutual Ins				SORIOI COI	THE POLICE OF TH	iioiii aucil	COMMINE				
Full Name (Last, First, Middle Initial)											
A. Kevin McCarthy for Congress				Date of	f Disburse	ment					
Mailing Address PO Box 12667		03	/ D 1		2014	Y					
City	State	Zip Code		Trans	action ID	: B42BEE6	90DC54	40DA8D			
Bakersfield	CA	93389		mans	action ib	. 5425220	300034	-0DA0D			
Purpose of Disbursement Political Contribution				Amoun	t of Each	Disburseme	ent this F	Period			
Candidate Name			Category/				2500	00			
Rep. Kevin McCarthy Office Sought: House Disburse	mont For: 0	04.4	Туре		7	7	2000	.00			
Senate President	ment For: 2 Primary Other (spec	Meneral Control									
State: CA District: 23											
Full Name (Last, First, Middle Initial)				Data at	(D'ala						
B. Kirk for Senate				Date of	f Disburse						
Mailing Address PO Box 8	Mailing Address PO Box 8					7	2014	Y			
City Winnetka	State IL	Zip Code 60093		Trans	action ID	: B2390F0	C733B94	14E4AD2			
Purpose of Disbursement Political Contribution			· · ·	Amoun	t of Each	Disburseme	ent this f	Period			
Candidate Name			Category/				4000				
Sen. Mark Steven Kirk			Type		7	7	1000	0.00			
	ment For: 2 Primary Other (spec	General									
Full Name (Last, First, Middle Initial) C. Maloney for Congress					f Disburse						
Mailing Address 49 East 92nd St				03	2		2014	Y			
City New York	State NY	Zip Code 10128		Trans	action ID	: BA859F0	8710DB	433981E			
Purpose of Disbursement Political Contribution			· · ·	Amount	t of Each	Disburseme	ent this f	Period			
Candidate Name Rep. Carolyn B. Maloney	Category				•		1000	.00			
	ment For: 20 Primary Other (spec	General	1,500			7					
SUBTOTAL of Disbursements This Page (optional).					1 40 3	1.45	4500	.00			
TOTAL This Period (last page this line number only											

SCHEDULE B (FEC Form 3X)				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
National Association of Mutual Ins	urance Companies I	PAC		
Full Name (Last, First, Middle Initial)				
A. McHenry for Congress	Date of Disbursement 03 11 2014			
Mailing Address PO Box 1406				
,	State Zip Code		Transaction ID : B1820946191F148599B1	
Hickory Purpose of Disbursement	NC 28603			
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name Rep. Patrick T. McHenry		Category/ Type	2500.00	
	ment For: 2014 Primary General Other (specify) ▼			
State: NC District: 10				
Full Name (Last, First, Middle Initial)				
B. MOORE FOR CONGRESS			Date of Disbursement	
Mailing Address PO BOX 16646			03 27 2014	
City MILWAUKEE	State Zip Code WI 53216		Transaction ID : B379D5C36A6EF4E78B38	
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	1500.00	
Rep. Gwen S. Moore		Type	1500.00	
	nent For: 2014 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
National Republican Congressional Committee			Date of Disbursement	
Mailing Address 320 First Street SE			03 11 2014	
City Washington	State Zip Code DC 20003-1838		Transaction ID : B08D612AC08954D20890	
Purpose of Disbursement				
Political Contribution Candidate Name		244	Amount of Each Disbursement this Period	
		Category/ Type	15000.00	
Office Sought: Senate President State: Disburser	ment For: 2014 Primary General Other (specify) ▼ Other2014			
District.	Juigi2014			
SUBTOTAL of Disbursements This Page (optional)		·····•	19000.00	
TOTAL This Period (last page this line number only))			

SCHEDULE B (FEC Form 3X)			FOR LINE	PAGE 61 OF 64		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
	ny information copied from such Reports and Staten for commercial purposes, other than using the name					
abla	NAME OF COMMITTEE (In Full)	, , ,				
$ \rangle$	National Association of Mutual Insu	urance Companies	PAC			
_	Full Name (Last, First, Middle Initial)			D . (D)		
Α.	New Democrat Coalition Political Acti	Date of Disbursemen				
	Mailing Address 607 14th Street NW Suite 800	03 11	2014			
	City	Transaction ID : BE	3202495403F41BBA08			
	Purpose of Disbursement	DC 20005		-	.020210010011122/100	
	Political Contribution			Amount of Each Disb	oursement this Period	
	Candidate Name		Category/		5000.00	
	200		Type		5000.00	
	Office Sought: House Disburser Senate	nent For: 2014 Primary General				
	President	Other (specify)				
	State: District:	Other2014				
	Full Name (Last, First, Middle Initial)					
B.	Republican Mainstreet Partnership	Pac		Date of Disbursemen	t /	
	Mailing Address C/O G & W 2201 Wisconsin Ave., Suite 320			03 11 2014		
	Washington	State Zip Code DC 20007		Transaction ID : B8	337AA157E2D8409C93C	
	Purpose of Disbursement Political Contribution			Amount of Each Disb	oursement this Period	
	Candidate Name		Category/ Type		5000.00	
		nent For: 2014				
		Other (anality) General				
	State: District:	Other (specify) ▼ Other2014				
_	Full Name (Last, First, Middle Initial)	Date of Disbursemen	t			
٥.	Roskam for Congress			M M / D D	/ Y Y Y Y Y	
	Mailing Address PO Box 713			03 11	2014	
	City S Wheaton	State Zip Code IL 60187		Transaction ID : BC	C10984B1665F4AAAACI	
	Purpose of Disbursement Political Contribution					
	Candidate Name Category/			Amount of Each Disb	bursement this Period	
	Rep. Peter J. Roskam			1000.00		
	Senate President	nent For: 2014 Primary General Other (specify) ▼				
_	State: IL District: 06					
s	SUBTOTAL of Disbursements This Page (optional)		······		11000.00	
Т	OTAL This Period (last page this line number only)		·····•			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE NUMBER: PAGE 62		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)	, р			
National Association of Mutual Insu	urance Companies	PAC		
Full Name (Last, First, Middle Initial)				
A. Scalise for Congress	Date of Disbursement			
Mailing Address PO Box 23219	03 27 2014			
City	Transaction ID : BA028D6527AFE4AC481			
Jefferson	LA 70183			
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	2500.00	
Rep. Steve Scalise Office Sought: House Disburser	ment For: 2014	Туре	7	
	Primary General Other (specify) ▼			
State: LA District: 01				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. Schock for Congress	Schock for Congress			
Mailing Address PO Box 10555			03 11 2014	
City Peoria	State Zip Code IL 61612		Transaction ID : BBBD6A81845C34BA1AA	
Purpose of Disbursement Political Contribution		· · · ·	Amount of Each Disbursement this Period	
Candidate Name		Category/	4000.00	
Rep. Aaron J. Schock		Type	1000.00	
	ment For: 2014 Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Scott Garrett for Congress			Date of Disbursement	
Mailing Address PO Box 905			03 27 7 2014	
City	State Zip Code			
Newton	NJ 07860		Transaction ID : B35C16C63ADC3406ABF	
Purpose of Disbursement Political Contribution				
Candidate Name		Amount of Each Disbursement this Period		
Rep. Scott Garrett		Category/	1000.00	
Office Sought: House Disburser Senate	ment For: 2014 Primary General	Туре		
State: NJ District: 05	Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)			4500.00	
TOTAL This Period (last page this line number only)	\ \			

SCHEDULE B (FEC Form 3X)	Lies congrete schodule(s)			PAGE 63 OF 64	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)		240			
National Association of Mutual Insu	irance Companies I	PAC			
Full Name (Last, First, Middle Initial) Southerland for Congress			Date of Disbursement		
Southerland for Congress					
Mailing Address PO Box 1692			03 11	2014	
City State Zip Code			Transaction ID : BF	BBCA563C2314A1A984	
Lynn Haven Purpose of Disbursement	FL 32444				
Political Contribution			Amount of Each Disb	ursement this Period	
Candidate Name		Category/		2500.00	
Rep. Steve Southerland II Office Sought: House Disbursen	ant For 2011	Туре		2000.00	
	nent For: 2014 Primary General Other (specify) ▼				
State: FL District: 02					
Full Name (Last, First, Middle Initial)			Data of Dishamana		
B. Steve Fincher for Congress			Date of Disbursemen		
Mailing Address PO Box 11153			03 11 2014		
Jackson	State Zip Code TN 38308		Transaction ID : BE	178D657E56F4E099A4	
Purpose of Disbursement Political Contribution			Amount of Each Disb	ursement this Period	
Candidate Name		Category/		2500.00	
Rep. Stephen L. Fincher		Type		2500.00	
	nent For: 2014 Primary General				
	Other (specify) ▼				
State: TN District: 08					
Full Name (Last, First, Middle Initial) C. TREASURE STATE PAC			Date of Disbursemen	t	
TREASURE STATE PAC			M M / D D	/	
Mailing Address 3242 CUMMINS WAY			03 27	2014	
•	State Zip Code MT 59802-3222		Transaction ID : B7	13A6B1388014323B89	
Purpose of Disbursement Political Contribution					
Candidate Name		Category/ Type	Amount of Each Disb	ursement this Period 5000.00	
Office Sought: House Disbursen	nent For: 2014	ı ype		7	
Senate	Primary General				
	Other (specify) ▼				
State: District:	Other2014				
SUBTOTAL of Disbursements This Page (optional)		·····		10000.00	
TOTAL This Period (last page this line number only)		.		110500.00	

	Lies concrete cohedule(a)			PAGE 64 OF 64		
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28 28b	24 25 26 28c X 29 30b	
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam					
	NAME OF COMMITTEE (In Full)	, реш				
$ \rangle$	National Association of Mutual Insu	ırance Companies I	PAC			
_	Full Name (Last, First, Middle Initial)			Data of Dishurson	ont.	
A.	MIKE DEWINE FOR OHIO	Date of Disbursement				
	Mailing Address 2587 CONLEY RD			03 11 2014		
		State Zip Code		Transaction ID : BEAA5C3286BCB49E692I		
	Cedarville Purpose of Disbursement	OH 45314-9525				
	Political Contribution			Amount of Each Di	sbursement this Period	
	Candidate Name		Category/		1000.00	
	Office Sought: House Disbursen	nent For: 2014	Туре	7		
		Primary General				
	President State: District:	Other (specify) ▼				
_	Full Name (Last, First, Middle Initial)					
В.					ent	
Mailing Addraga				M = M / D = D / Y = Y = Y		
	Mailing Address					
	City	State Zip Code				
	Purpose of Disbursement					
	Out it late Name			Amount of Each Disbursement this Period		
	Candidate Name		Category/ Type			
	Office Sought: House Disbursen	nent For:	1,700	, , , , , , , , , , , , , , , , , , , ,	,	
	Senate President	Primary General				
	State: District:	Other (specify) ▼				
	Full Name (Last, First, Middle Initial)					
C.				Date of Disburseme	_	
	Mailing Address			M M / D D	/	
-	City	State Zip Code				
	Purpose of Disbursement					
				Amount of Each Disbursement this Period		
Candidate Name		Categor Type				
	Office Sought: House Disburser					
	Senate President	Primary General Other (specify) ▼				
	State: District:	onior (specify) ▼				
	<u> </u>				1000.00	
s	SUBTOTAL of Disbursements This Page (optional)		·····•		1000.00	
Т	OTAL This Period (last page this line number only)				1000.00	
			_	7		